

**DEPARTMENT OF  
PUBLIC HEALTH AND HUMAN SERVICES**



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DATE: June 25, 2008

TO: Sherman Weimer, Executive Director  
Jean Nolan, President of Board of Directors, Eastern Montana Industries

FROM: Kathleen Kaiser, Quality Improvement Specialist

RE: Comprehensive Evaluation, Quality Assurance Review FY 2008

Please find attached the QA Review report for Eastern Montana Industries. The format is different than in prior years. The table shows the areas of review with any pertinent findings noted in the comment sections, followed-up with quality assurance observation sheets (QAOS) and appendices. I wish to express my appreciation to you and your staff for all the assistance provided to me during the course of this review and when I was on-site.

This report contains findings, comments and suggestions noted during my review of day services, group home services, supported living services and community supports from checking agency and client records and client and staff interviews. It also includes a review of observations from the above time frame as well as a desk review of incident trends, medication errors, Adult Protective Services issues, client rights issues, transportation and Individual Plan issues, etc. Also reviewed were licensing and fiscal reports.

During the review, the use of Quality Assurance Observation Sheets (QAOS) was used to record exemplary practices and indicated deficiencies. The QAOS is a record of what is observed and which Administrative Rule, DDP Policy or contract requirement is surpassed or deficient. There were **10** commendations and **13** deficiencies.

I look forward to continued success with Eastern Montana Industries. Thanks to you and your staff for the ongoing effort to provide quality services to individuals with developmental disabilities.

cc: Dain Christianson, Region 1 Regional Manager  
Tim Plaska, Bureau Chief, DDP  
John Zeeck, Quality Assurance Specialist, DDP  
Perry Jones, Waiver Specialist, DDP  
DDP Contract File

## **QUALITY ASSURANCE REVIEW**

### **SCOPE OF REVIEW**

The purpose of this summary is to evaluate the quality of services provided to individuals with developmental disabilities by Eastern Montana Industries. The services reviewed are the following: Community Home, Supported Living, Work/Day services and Transportation. Also reviewed are services provided to individuals with funding through Community Supports. Information was garnered through personal observations, interviews and review of documentation on-site as well as a desk review of data collected through the review period including quarterly reports. On site visits started on April 24<sup>th</sup>, 2008 and ended on June 6<sup>th</sup>, 2008. Cindy Frederickson, QIS, Region 1 Glasgow and Sandra Carpenter, QIS Region 1 Glasgow, assisted with the review.

### **GENERAL AREAS**

#### **Administrative**

- Accomplishments
  - Completion of Phase 1 of the College of Direct Support by direct care staff and most of the administrative staff.
  - Implementation of a new cost allocation system (applauded by the DPHHS auditors).
  - Initial work under way on the development of a foundation.
  - Plans underway to remodel the main workshop in Miles City to reduce the size of the two workshop areas.
  - Development of new vehicle maintenance system to track repairs and maintenance to fleet of 20 some vehicles.
  - Addition of incident investigator for Glendive program.
  - Expansion of Glendive day program to meet the needs of several additional consumers in the community.
  - Training of staff on the new AWACS invoicing system has occurred and it is now implemented.
  - Purchase of additional Star Transit van (eliminating the final group home conversion van).
  - Over 40 consumers participated in the recent regional Special Olympic Games in Glendive.
  - Nefsy Grant received to help develop computer labs in Miles City and Glendive (for College of Direct Support).
  - Over the last year EMI has completed an expansion of Woods & Goods and the refurbishing of the exterior of the buildings.
- They have also completed a project to refurbish the exterior front on the main building on South Hanes Ave.

Both buildings are very nice looking and are much easier to access. This enhances the buildings and the surrounding community. (QAOS 2-08)

- EMI has fully implemented the new PSP system. There have been lots of challenges and lots of changes along the way this year and there will be more to come. Through the whole process change, the EMI Staff have maintained a positive attitude and are looking for new ways to make the new system work better and ultimately to benefit the consumer. The EMI Staff will take what they have learned this first year to make next year even better. A more personal center system will enhance the quality of life for the consumer. (QAOS 23-08)

- Fiscal/Audit

-The audit report completed for the fiscal year ending June 30, 2007 had three recommendations, one on outstanding checks, one on depreciation schedules both issues are easily resolved. The third issue is that EMI has only partially completed an accounting manual.

-The State DPHHS audit bureau completed an Internal Audit for the time period of July 1, 2006 to June 30, 2007 and found recommendations. First that the client funds showed 8 clients had negative balances in the group checking account; EMI is working on this issue. The second concern was W-4's and I-9's were checked and many were found to be incomplete or missing from employee files. EMI is reviewing all files to bring the files up to compliance.

- Licensing/Sanitarian/Fire Marshal

-All five Miles City and the three Glendive Group Homes have been licensed by the Quality Assurance Specialist within the last year.

- In reviewing the documentation of monthly fire drills in Glendive: Nolan Group Home is missing the last six months of fire drills. Wyoming is missing 1-08 & 2-08.

In reviewing the documentation of monthly fire drills in Miles City: Hafla is missing 3-07, 4-07, 5-07, 7-07, 8-07, 10-07, 11-07, 3-08, and 4-08. Stephanie is missing 8-07, 9-07, 11-07, 12-08, and 4-08. Box Elder is missing 3-07, 6-07, 8-07, 9-07, 11-07, 12-07, 2-08, and 3-08.

Gordon is missing 3-07, 9-07, 12-07, 2-08, 3-08, and 4-08. South Earling is missing 12-07. If Staff and Consumers do not practice monthly fire drill, they may not know what to do if an actual fire were to occur.

EMI's response: Cause is due to manager turnover & lack of supervision. Nolan manager not assuring that drills were filed/completed/copied. MC - A manager's monthly tasklist was created to help managers track majority of their paperwork including fire drills. Glendive - A checklist will be posted at the day program by 7/1/08 to keep track of fire drills, when ran, forms copied and sent to MC. Wyoming fire drills for 1/08 and 2/08 were ran, but not copied and sent to MC. Copies will be faxed over to QIS. (QAOS 8-08)

- During the Box Elder Group Home visit three smoke detectors were tested and only one worked. If smoke detectors are not functioning properly when tested they may not function properly in an emergency.

EMI's response: Group home staff not checking smoke alarms monthly. Batteries have been replaced since inspection. Group home manager counseled on testing alarms with fire drills. (QAOS 14-08)

- Staffing

- Eastern Montana Industries strongest asset is their Staff, from the Executive Director to Administration and on down to the part-time substitutes. Throughout the past year I have had many occasions to interact with the Staff at EMI and without exception all of them have been very positive and professional. All of the interactions that I have observed throughout the year

have always had a care giving qualitive about them which is very positive for the staff and the consumer. This creates a very positive working atmosphere to work in. (QAOS 1-08)

- CDS

- All of the Full-time staff that were signed up to complete the College of Direct Support by March of 2008, have completed by the specified date. This took time and effort and it will be very helpful in the future. A great accomplishment that will enhance the quality of services provided to the consumers. (QAOS 3-08)

- The College of Direct Support curriculum is not a requirement for the Administrative Staff, but nine of the Administrative Staff took it upon themselves to complete the same sections that the Direct Care Staff had to do. This shows dedication and commitment to the job. This is a great accomplishment and it will help provide consistency in training. (QAOS 4-08)

- Background Checks

- The files from the last four staff hired were checked and all the required background checks had been done and a copy was on file.

- Orientation and training

- A review of five recently hired staff had documentation of orientation.

- A review of five staff files for ongoing annual training, found documentation of training covering the subjects on the annual training list.

- During Staff surveys in both Miles City and Glendive, it was discovered that 6 staff out of 10 stated that in the case of abuse they would report to their supervisor and let them handle it. The Staff were not aware that they are manditory reporters and when asked they did not state that they needed to write an incident report.

Several of the Staff surveyed also did not know what a PSP was and where the information used for them was obtained Staff not receiving ongoing training can affect the quality of service provided to the consumer.

EMI's response: Staff are instructed to report cases of abuse to supervisors immediately. Supervisors call APS and make other necessary notifications. PSP process is new. Other than assisting with vision ideas and running objectives, staff are not aware of the PSP process. They know it replaced the IP process. RSC will complete an inservice with Hab Special. on PSP process. All staff are reminded at Mandt & Abuse Prev.

classes/inserives that they are mandatory reporters. They can call APS, but are encouraged to use chain of command. Incident reports are written at the time of the incident by staff or are directed by supervisor to do so. In future, staff will be reminded that they are mandatory APS reporters, and an IR needs to be written immediately.

(QAOS 9-08)

- In Miles City, a new staff survey was created and presented to the staff at an all staff meeting and it was presented in such a positive way that they got a really good response with some very useful ideas. Ideas for some positive changes will improve the qualilty of the services provided. (QAOS 20-08)

- Staff hours per ICP are being provided=adequate staffing "ratio"

- During the on-site visits for this review the staffing ratio was reviewed and met in all sites. In one home it was exceeded because extra staff was scheduled in case we wanted to do staff interviews. This staffing ratio is not the case all of the time because EMI sends the QIS copies of the schedules for the Glendive Program and they work short on shift often due to lack of staff availability.

- Incident Management/APS

- EMI is to be commended for training another incident investigator for the Glendive Program.

EMI is also commended for having a fully functioning Incident Management team that meets weekly to address all incident reports. There are meeting notes about the issues that are discussed as well as the follow up of any concerns. Having these in place effects the quality of services provided to the consumers. (QAOS 21-08)

## **RESIDENTIAL SERVICES REVIEWED**

### **GROUP HOME**

- **General Description**

For the QA review, one individual from each of the eight Group Home was randomly selected and a file review was completed, along with a home visit.

- New leisure activities have taken place around the holidays in the Miles City Group Homes this last year. There has been a competition for each holiday this year to see which home could decorate the best. They had some limitations that they had to try to work around like consumers that like to tear up or continuously relocate decorations. The competition was good spirited and the consumers were very involved. Having a varitey of leisure activities and a home decorated for the holiday will enhance the consumer's lives. (QAOS 5-08)

- The Group Homes in Glendive are very neat and clean and well cared for. The Consumers rooms were nicely decorated and individualized with a great deal of care. The Staff are to be commended for their efforts to make the group homes a nice place for the consumers to live. Having a nice home to live in enhances the lives of the consumers. (QAOS 19-08)

- **Health and Safety**

- **Medication**

- During a review of Medication Logs in the Group Homes in Miles City and Glendive, it was noted that there were cases where EMI Staff signed off on medication sheets indicating they had assisted consumers with medication and upon cross checking with medication certification list, these staff were not currently certified to assist with medication.

It was also noted that a staff member that hasn't been medication certified for over 6 months had signed off and assisted with over the counter medication on several occassions. Staff providing assistance with medication administration without being certified could cause medication errors.

EMI's response: Staff possibly not aware they were expired. EMI has tried to improve communication with staff and provided reminders of upcoming expirations. Human Resources will send out a bi-weekly list of non-certified staff, to post. One Glendive staff member was certified with AWARE, but has now been certified at EMI. (Need clarification on this particular case from the state.) (QAOS 7-08)

- When reviewing medication records at Wyoming Group Home a consumer is on a PRN for pain medication and there is no written protocal on when the medication should be given, both staff on could tell me the behaviors that the consumer displays to show that she might be in pain and in need of the medication, but there is no written protocal for consistency. Consumer may receive too much or too little medication and this can effect their level of comfort.

EMI's response: The written protocol for PRN was overlooked. EMI assumed all PRNs had a written protocol. This was an oversight. A written protocol will be in place with the assistance of Dr.'s recommendation regarding PRN medication by June 18, 2008. (QAOS 11-08)

- **Supervision**

- QAOS sheets # 6, 10, 12, 13 and 16 are all about issues where an I.P. or a PSP was not implemented as specified in the plan. This issue was in both the Miles City and the Glendive Program. This shows a lack of internal monitoring to assure that a program or action has been implemented and run according to the plan. Consumers not receiving services as specified in their plan are not achieving success and receiving training consistently which could affect the quality of life.

EMI's response: Lack of supervision Supervisor (RSC) tries to attend PSPs and checks on manager, assisting as needed to ensure objectives are implemented on time. RSC will keep better schedule of PSPs and implementation dates, assisted by Habilitation Specialist. (QAOS 18-08)

- \* **Protocols**

- During the Box Elder visit, Staff were asked if any of the consumers were on bathing protocols and they said yes two consumers have bathing protocols, when asked where the protocols were the staff could not locate the written protocol. Consumers not receiving enough supervision while bathing because staff not properly trained with protocol.

EMI's response: Protocols were removed and not reposted. Originals could not be located since manager left. Protocols were retyped and reposted. (QAOS 15-08)

- **Service Planning & Delivery**

- At the Nolan Group Home, in the PSP plan there are 3 Actions concerning locating vacation sites, transportation, cost and staffing to accompany # 15 on a vacation. This was to have started on 9-13-07. There is no documentation available that any thing has been done with these PSP actions, when asked the new acting manager listed as the EMI Staff person responsible knew nothing about this action. Consumer not succeeding with his vision to take more vacations.

EMI's response: On March 6, 2008, staff did inquire and receive information about vacations in the Black Hills. Questions arose about saving money for a trip without going over resources. The manager at the time left the position and the acting manager did not check the status of the PSP goals. No one continued to work on the objectives. The acting manager is now aware of the objectives and will continue to look into additional vacation sites, transportation and costs. She will document this information and the Residential Coordinator (Eileen Geiger) will continue to monitor and check on the status of the objectives along with the Habilitation Specialist. (QAOS 6-08)

- At Wyoming Group Home, #17 has a vision to have the opportunity to shop and spend my money. There are two actions to accomplish this and they are:

#17 will purchase personal items each month with assistance from Group Home Manager.

#17 will have the opportunity to shop and spend his money. The documentation shows that #17 has only gone one time in January (08) and one time in April (08). The consumer not receiving the services as specified in his plan can affect the quality of the services he receives.

EMI's response: Manager stated Feb. 08 was done, but not documented (oversight. March, however was not done due to staff shortages. May has been completed. Manager

has stated the action steps will be completed by the 10<sup>th</sup> of each month starting in July. Eileen Geiger will be monitoring program objectives to ensure they are being run and documented. (QAOS 13-08)

- At Gordon Group Home, in the PSP plan there is a vision : I want to be healthy.

There are two actions that state: #9 will drink an Ensure (3) times daily at the group home on non work days. (2) times daily on work days. These actions were to begin on 2-5-08 and were started on 3-1-08

Documentation for the Ensure was missing on 3-1, 3-2, 3-8, 3-9, 3-15, 3-16, 3-22, and 3-23.

The second action is #9 will eat all meals when presented at the group home on a daily basis.

For the month of March dinners were only documented 5 times. and there was no documentation for the other 2 meals on 3-1, 3-2, 3-5, 3-8, 3-9, 3-15, 3-16, 3-21, and 3-22.

The vision states that the consumer wants to be healthy, if the actions are not implemented in a timely manner and continued then the consumers vision will not be met.

EMI's response: Lack of manager supervision. Lack of supervisor supervision. Lack of staff documentation. GH Manager and staff will receive counseling and increased checks of books (Actions). Hab. Spec. will continue monthly data reviews. (QAOS 16-08)

#### **SUPPORTED LIVING & CONGREGATE SUPPORTED LIVING:**

- **General Description**

There were two individuals randomly selected from the Miles City Supported Living program and a file review was completed, along with a home visit.

- **Health and Safety**

-No deficiencies were found.

- **Service Planning and Delivery**

-No deficiencies were found.

#### **Work/Day/Community Employment:**

- **General Description**

For the QA review, the consumer sample included the individuals picked in the above residential section for all 8 Group homes, the two consumers picked for supported living and two of the consumers that receive community supports at the EMI Work Shop.

- **Health/Safety**

- No deficiencies were found.

- **Service Planning/Delivery**

- The Glendive Program is to be commended for expanding the services to meet the special needs of two consumers in the Glendive area. Change can be challenging and when the special needs of two consumers was identified, the Glendive program expanded to accommodate them. This enhanced the quality of life for these consumers. (QAOS 22-08)

- When reviewing Consumer # 15, for the Glendive Work Activity Center, the PSP objective data sheets documenting that #15 will carry two empty can racks back after crushing cans daily. There is data up until 9-17-07 and then no data until 4-15-08. If objectives are not carried out then the Consumer vision will not be achieved.

EMI's response: Day Program Manager, Rhonda, indicated that the objective was dropped, however she forgot to formally drop and notify all areas regarding the dropped objective, therefore was reimplemented on 4/15/08. Rhonda will review programs on a monthly basis to ensure appropriate documentation is being recorded in the correct time frame. (QAOS 10-08)

### **Community Supports:**

- **General Description**

**A minimum of five individuals were reviewed for the QA review of Community Supports. The individuals were randomly selected and included 3 from Miles City and 2 from Glendive. A file review was done, as well as a client interview and a site review with a consumer receiving Supported Living Services.**

- **Health/Safety**

- In Miles City, when I visited #2 apartment there was not a smoke detector in her apartment. It is a health and safety issue if there is no smoke detector.

EMI'S response: Likely assumed would be present in apartment. Also overlooked when consumer swapped apartments. A smoke detector was purchased and installed next day after inspection. (QAOS 17-08)

- **Supervision**

- QAOS sheet # 12 are all about issues where an I.P. or a PSP was not implemented as specified in the plan. This issue concerns the Glendive Community Supports only. This shows a lack of internal monitoring to assure that a program or action has been implemented and run according to the plan. Consumers not receiving services as specified in their plan are not achieving success and receiving training consistently which could affect the quality of life.

EMI's response: Lack of supervision Supervisor (RSC) tries to attend PSPs and checks on manager, assisting as needed to ensure objectives are implemented on time. RSC will keep better schedule of PSPs and implementation dates, assisted by Habilitation Specialist. (QAOS 18-08)

- **Service Planning/Delivery**

- For the Glendive Community Support Program, there is an objective that has not been implemented as specified. This I. P. Objective was listed in last years Annual Review in QAOS sheet #20.

This years I.P. Objective reads that #3 will participate in one-to-one activities including social outings up to 7hrs. The start date for this I.P. was 12-31-07.

A second objective stated in this I. P. states that #3 will prepare meals including shopping, cooking and clean up for 3 hrs each week. The data shows that this program was run until 2-6-08 and not since then. The consumer is not receiving the services as specified in the plan.

EMI's response: Objective #3 could not be implemented due to unavailability of a staff person. The second objective had to be stopped due to staff having an increase in their seizure activity. I would not allow him the use of an EMI vehicle for liability purposes. The family was unavailable to assist consumer with driving. No other person has shown an interest in the position. Pam Junso will place an ad at Job Service specifically advertising the position for someone to cook with the consumer. Past ads have centered more on the mentor position. Pam will also check the Resource Center for availability of



cooking classes for the consumer and if this is a possibility, will amend the objective. These steps will be taken by 6/30/08. (QAOS 12-08)

**Transportation**

- **EMI has a fleet of 20 some vehicles that they use to provide transportation for consumers to and from work, home, medical appointments and other activities throughout the community.**
- **EMI has developed a new vehicle maintenance system to track repairs and maintenance for the fleet of 20 some vehicles.**

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**Conclusion:**

- **All QAOS sheets accepted and considered closed and no other outstanding corrections**

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In summary, Eastern Montana Industries, and all those who work for and on behalf of the consumers should be proud of their accomplishments. Improvements are an ongoing goal that I have witnessed first hand. Thank you for all you do. I look forward to assisting in any way that I can in order to support you and the consumers in your endeavors.

Attachments:

Quality Observation Assurance Sheets numbered 1-23  
Worksheets

cc:

Dain Christianson, Region 1 Regional Manager  
Tim Plaska, Bureau Chief, DDP  
John Zeeck, Quality Assurance Specialist, DDP  
Perry Jones, Waiver Specialist, DDP  
DDP Contract File

**Evaluators: Kathleen Kaiser, QIS, Cindy Frederickson, QIS and Sandy Carpenter, QIS**

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Comprehensive Evaluation  
6/26/2008

Agency: EMI  
Evaluators: Kathleen Kaiser, QIS

DESK REVIEW:	Appendix or QAOS
<p><b>Fiscal (audits, cost plans, invoices):</b></p> <p>The audit report completed for the fiscal year ending June 30, 2007 had three recommendations, one on outstanding checks, one on depreciation schedules both issues are easily resolved. The third issue is that EMI has only partially completed an accounting manual, but this is very time consuming and will be ongoing for a long time.</p> <p>The State DPHHS audit bureau completed an Internal Audit for the time period of July 1, 2006 to June 30, 2007 and found recommendations. First that the client funds showed 8 clients had negative balances in the group checking account, EMI is working on this issue. The second concern was W-4's and I-9's were checked and many were found to be incomplete or missing from employee files. EMI is reviewing all files to bring the files up to compliance.</p>	
<p><b>Licensing:</b></p> <p>In reviewing the documentation of monthly fire drills in Glendive: Nolan Group Home is missing the last six months of fire drills. Wyoming is missing 1-08 &amp; 2-08.</p> <p>In reviewing the documentation of monthly fire drills in Miles City: Hafla is missing 3-07, 4-07, 5-07, 7-07, 8-07, 10-07, 11-07, 3-08, and 4-08. Stephanie is missing 8-07, 9-07, 11-07, 12-08, and 4-08. BoxElder is missing 3-07, 6-07, 8-07, 9-07, 11-07, 12-07, 2-08, and 3-08. Gordon is missing 3-07, 9-07, 12-07, 2-08, 3-08, and 4-08. South Earling is missing 12-07.</p>	#8-08

All of the group homes in both Miles City and Glendive are up to date and are currently licensed.

**Agency: EMI**  
**Evaluators: Kathleen Kaiser, QIS**

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Comprehensive Evaluation  
6/26/2008

Agency: EMI  
Evaluator: Kathleen Kaiser, QIS

Staff Related:										Appendix or QAOS
<b>Evidence Found of Orientation Training (mark 'yes' if present, 'no' if not present)</b>										
staff initials	CR	AW	CK	ES						
yes/no	yes	yes	yes	yes						
<b>Note where evidence found:</b> HR files										
<b>Evidence Found DDCPT or equivalent:</b> CDS										
staff initials	CR	AW	CK	ES						
yes/no	yes	no	no	no						
<b>Note where evidence found:</b> CDS not due to be done yet.										#3-08
All of the staff signed up to complete the CDS have done so by the timelines and 9 administrative Staff have also completed it.										#4-08
<b>Evidence of Criminal Background Checks:</b>										
staff initials	CR	AW	CK	ES						
yes/no	yes	yes	yes	yes						
<b>Note where evidence found:</b> personnell files, staff training records, agency employment application										
<b>Evidence of Staff Survey:</b>										
staff initials	LR	MR	EH	DB	CA					
yes/no	yes	yes	yes	yes	yes					
<b>Note where evidence found:</b> HR files										#20-08
A new staff survey was created and presented to the staff at an all staff meeting.										
<b>Comments: (regarding staff hiring, screening, training, supervision)</b>										
During Staff surveys it was discovered that 6 staff out of 10 stated that in the case of abuse they would report to the supervisor and let them handle it. The Staff were not aware that they are manditory reporters and when asked they did not state that they needed to write an incident report.										#9-08

Several of the Staff surveyed also did not know what a PSP was and where the information used at them was obtained.

Comprehensive Evaluation  
6/26/2008

Agency: EMI  
Evaluator: Cindy Fredrickson

<b>Staff Related:</b>								<b>Appendix or QAOS</b>
<b>Evidence Found of Staff Training: (mark 'X' if present, 'no' if not present)</b>								
<b>staff initials</b>	DJ	DT	LR	KM	RW	LC		
1st aid/CPR	yes	yes	yes	yes	yes	yes		
Abuse Prevention	yes	yes	yes	yes	yes	yes		
Client Rights	yes	yes	yes	yes	yes	yes		
Incident Reporting	yes	yes	yes	yes	no	no		
Confidentiality	yes	yes	yes	yes	yes	yes		
IP/PSP Process	no	yes	yes	yes	yes	no		
CDS complete w/in 6 months of hire date?	yes	yes	yes	yes	yes	yes		
Medication Cert	yes	yes	yes	no	no	yes		
<b>Note where evidence found: Staff training files</b>								
<b>Comments:</b> EMI's strongest asset is their Staff, from the Executive Director to Administration and on down to part-time substitutes. Throughout the past year I have had many occasions to interact with the Staff at EMI and without exception all of them have been very positive and professional.								#1-08

Comprehensive Evaluation  
6/26/2008

Agency: EMI  
Evaluators: Kathleen Kaiser, QIS

IP Checklist: check if evidenced		Note Site Reviewed:								Appendix or QAOS
Consumer Initials		#7	#8	#9	#10	#11	#12	#13	#14	
<b>On site</b>	Consumer/Family Survey	yes	yes	yes	yes	yes	yes	yes	yes	#18-08
	PSP/IP Doc Avail to all Staff	yes	yes	yes	yes	yes	yes	yes	yes	
	IPP/Actions Implemented	yes	yes	no	most	yes	yes	yes	yes	
	Data for IPP/Actions	yes	yes	most	most	yes	yes	yes	yes	
	Data Internally Monitored	yes	yes	no	no	yes	yes	yes	yes	
	Self Medication Objective	NA	NA	NA	NA	NA	NA	NA	yes	
	Consumer informed of grievance procedure	yes	yes	yes	yes	yes	yes	yes	yes	
	SL consumer choice of SL staff	NA	NA	NA	NA	NA	yes	yes	yes	
	Rights Restrictions	no	no	yes	no	no	no	no	no	
<b>CM INPUT</b>	PSP/IP Checklist	yes	yes	yes	yes	yes	yes	yes	yes	
	PSP/IP Annually?	yes	yes	yes	yes	yes	yes	yes	yes	
	Individual Needs Addressed?	yes	yes	yes	yes	yes	yes	yes	yes	
	Assessment Based?	yes	yes	yes	yes	yes	yes	yes	yes	
	Quarterly Reports?	yes	yes	most	most	most	yes	yes	yes	
	Incident Reports Addressed?	yes	yes	yes	yes	yes	yes	yes	yes	
	Behavioral Supports Addressed?	yes	yes	yes	yes	yes	yes	yes	yes	
	Functional Analysis Needed?	NA	NA	NA	NA	NA	NA	NA	NA	
Free from Aversive Procedures?		yes	yes	yes	yes	yes	yes	yes	yes	
<b>Comments: (regarding service planning and delivery)</b>  EMI has fully implemented the new PSP system. There have been lots of challenges and lots of changes along the way this year and there will be more to come. Through the whole process change, the EMI Staff have maintained a positive attitude and are looking for new ways to make the new system work better and ultimately to benefit the consumer.										

Comprehensive Evaluation  
6/26/2008

Agency: **EMI**      Glendive  
Evaluators: Kathleen Kaiser, QIS

IP Checklist: check if evidenced		Note Site Reviewed:								Appendix or QAOS
		Nolan	Brockway	Wyoming	CSP					
Consumer Initials										
<b>On site</b>	Consumer/Family Survey	yes	yes	yes						
	PSP/IP Doc Avail to all Staff	yes	yes	yes						
	IPP/Actions Implemented	no	yes	no						#13-08
	Data for IPP/Actions	yes	yes	yes						#6-08
	Data Internally Monitored	no	yes	no						#18-08
	Self Medication Objective	Na	NA	NA						
	Consumer informed of grievance procedure	yes	yes	yes						
	SL consumer choice of SL staff	NA	NA	NA						
	Rights Restrictions	no	no	no						
<b>CM INPUT</b>	PSP/IP Checklist	yes	yes	yes						
	PSP/IP Annually?	yes	yes	yes						
	Individual Needs Addressed?	yes	yes	yes						
	Assessment Based?	yes	yes	yes						
	Quarterly Reports?	some	yes	some						
	Incident Reports Addressed?	yes	yes	yes						
	Behavioral Supports Addressed?	yes	yes	yes						
	Functional Analysis Needed?	NA	NA	NA						
Free from Aversive Procedures?	yes	yes	yes							
Comments: (regarding service planning and delivery)										



Comprehensive Evaluation  
6/26/2008

Agency: EMI Community Supports  
Evaluator: Kathleen Kaiser, QIS

IP Checklist: check if evidenced		Note Site Reviewed:								Appendix or QAOS
Consumer Initials		#2	#3	#4	#5	#6				
<b>onsite</b>	Consumer/Family Survey	yes	yes	yes	yes					#18-08
	PSP/IP Doc Avail to all Staff	yes	yes	yes	yes	yes				
	IPP/Actions Implemented	yes	no	yes	yes	yes				
	Data for IPP/Actions	yes	no & yes	yes	yes	yes				
	Data Internally Monitored	yes	no	yes	yes	yes				
	Self Medication Objective	yes	NA	NA	NA	NA				
	Consumer informed of grievance procedure	yes	yes	yes	yes	yes				
	SL consumer choice of SL staff	yes	yes	yes	NA	NA				
<b>CM INPUT</b>	Rights Restrictions	NA	NA	NA	NA	NA				
	PSP/IP Checklist	yes	yes	yes	yes	yes				
	PSP/IP Annually?	no #2	yes	yes	yes	yes				
	Individual Needs Addressed?	yes	yes	yes	yes	yes				
	Assessment Based?	yes	yes	yes	yes	yes				
	Quarterly Reports?	no	yes & no	yes	no	yes				
	Incident Reports Addressed?	yes	yes	yes	yes	yes				
	Behavioral Supports Addressed?	trying	NA	NA	NA	NA				
Functional Analysis Needed?		NA	NA	NA	NA	NA				
Free from Aversive Procedures?		yes	yes	yes	yes	yes				
<b>Comments: (regarding service planning and delivery)</b>  #2 started receiving SL serviecs in October 07 and had a special I.P. in January and did not have her intake PSP until March. EMI stated that it had been overlooked by the CM and they had asked the CM for a PSP meeting on several occasions.										

Comprehensive Evaluation  
6/26/2008

Provider: EMI CS  
Eval Date: 5/7/2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer #2	Hours per ICP:				
<b>Actions per PSP</b>	<b>IP</b>	<b>Evidence support provided consistently?</b>			
1. At #2's home she will self administer her medications per T.A.		yes data sheet is present			
100% 30 consecutive days					
2. When presented with fire safty questions #2 will answer questions correctly.		yes data sheet is present			
100% 5/5 sessions					
3. #2 will complete a monthly budget to be reviewed with SL staff weekly		yes data sheet is present			
4. #2 will find employment in the community and maintain employment with weekly follow along by supported employment.		not yet			
5. #2 will attend the Be Cool curriculim 1 per week until completed.		not started yet			
<b>Protocols:</b>		<b>Evidence staff clearly understood and were able to implement protocol?</b>			

## 6/26/2008

Eval Date: 5/21/2008

[illegible][illegible]

6/26/2008

Provider: EMI CS

Eval Date: 4/25/2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

[illegible][illegible]

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Comprehensive Evaluation  
6/26/2008

Provider: EMI CS  
Eval Date: 4/25/2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

[illegible]

Comprehensive Evaluation  
6/26/2008

Provider: EMI S.E. GH ITU WA  
Eval Date: 4/24/2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer #7	Hours per ICP: W-20.00 GH-55.31					
Actions per PSP	IP	Evidence support provided consistently?				
1. While eating lunch #7 will eat slowly with staff prompting as needed daily in ITU and/or kitchen.		yes data sheet present				
2. When sorting shoes for recycling #7 will place rubber band on 10 pair of shoes per T.A.		yes data sheet present				
3. After lunch, #7 will wash the dishes listed on TA		yes data sheet present				
4. When sorting cloths for recyling in auto detail #7 will place clothes into place as listed on TA		yes data sheet present				
5. While eating lunch, #7 will wipe his mouth when prompted.		yes data sheet present				
6. At SEGH #7 will dress himself correctly. Putting shirt and pants on correctly daily		yes data sheet present				
7. At SEGH #7 will reduce inappropriate behaviors of property destruction physical aggression, SIB.		yes data sheet present				
8. At SEGH #7 will help with household chores of carrying out garbage daily & carrying laundry baskets back to rooms.		yes data sheet present				
9. At SEGH after toileting #7 will wipe his bottom with staff assistance as needed		yes data sheet present				

[illegible]

6/26/2008

Eval Date: 4/24/2008

[illegible][illegible]



Comprehensive Evaluation  
6/26/2008

Provider: EMI GordonGH & WAC  
Eval Date: 4/24/2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

[illegible]

Comprehensive Evaluation  
6/26/2008

Provider: EMI BE GH WAC  
Eval Date: 4/24/2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer #10	Hours per ICP: W-10.0 GH-32.01						
Actions per PSP		Evidence support provided consistently?					
#10 will participate in the exercise while you sit video one time a week at WAC		yes data sheet present					
#10 will perform 5 known tasks per week for pay at EMI WAC		yes data sheet present					
#10 will vacuum the back shop rugs one time a week.		yes data sheet present					
#10 will earn a paycheck at EMI-WAC.							
#10 will go on a walk 2 times a week.BE GH		only one time per week 3-3, 2-3, 1-4, 12-4					
#10 will go shopping for personal items 2 times a month BE GH.							
#10 will assist in perparing 1 meal each week. BE GH		yes data sheet present					
#10 will participate in activities she enjoys. BE GH		craft projects					
#10 will hve her hair fixed at least 2 times a week per her style. BE GH		not started yet, no documentation, but hair is done					
#10 will have her fingernails trimmed and polished 1 time every 2 weeks.		not started yet, no documentation, but nails are done					
10 will choose the nail color. BE GH							
#10 will look pretty. BE GH							

Comprehensive Evaluation  
6/26/2008

Provider: EMI                      Hafla GH    WAC  
Eval Date: 4/24/2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

[illegible][illegible]

Comprehensive Evaluation  
6/26/2008

Provider: EMI SL WAC  
Eval Date: 4/24/2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

[illegible]

Comprehensive Evaluation  
6/26/2008

Provider: EMI SL WAC  
Eval Date: 5/7/2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer #13	Hours per ICP: W-9.0 SL-Base							
Actions per PSP IP		Evidence support provided consistently?						
#13 will clean his apartment at least 1 per week SL will monitor		yes data sheet present						
#13 will correctly answer fire satey review questions 1 per month. SL		yes data sheet present						
#13 will correctly answer emergancy skills review question 1per month. SL		yes data sheet present						
When #13 assists with sweeping the woodshop on previous Friday , and on		yes data sheet present						
M, T, W he will be allowed to go home at 2:00 break on Thursday.								
Once a week contigent on displaying appropriate behavior, Training Specilist		yes data sheet present						
will assist #13 in writing a letter.								
#13 will earn a pop when he sweeps and mops the back shop and wages.		yes data sheet present						

Comprehensive Evaluation  
6/26/2008

Provider: EMI      SL      WAC  
Eval Date: 4/24/2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer #14	Hours per ICP: W-10.0 SL-48.5						
Actions per PSP		Evidence support provided consistently?					
#14 will review a safety smart II video one time weekly with SL trainer.		yes data sheet present					
#14 will review people smart II video one time weekly until completed with SL tr.		yes data sheet present					
#14 will review fire safety one time monthly with SL trainer		yes data sheet present					
#14 will reside safely in his apartment independently.		yes data sheet present					
#14 will participate with the lawn crew one time weekly during the mowing sea.		yes data sheet present					
#14 will participate in smart trust with WAC trainer one time weekly.		yes data sheet present					
Upon completion of Smart trust, #14 will participate in Date Smart II with							
WAC trainer one time weekly.							
#14 will work and earn a wage.		recycling					
#14 will arrange a vocational evaluation with supportive employment.							
#14 will be evaluated by Supported Employment.							

Comprehensive Evaluation  
6/26/2008

Provider: EMI      Glendive    Nolan GH  
Eval Date: 5/7/2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer #15	Hours per ICP WAC - 20.00 GH - 49.81						
Actions per PSP		Evidence support provided consistently?					
Nolan Group Home Manager will research possible vacation sites that #15 would like.		No progress QAOS #6-08					
Nolan Group Home Manager will notify the team of vacation destination, transportation arrangements and cost.		No progress QAOS #6-08					
GH Manager will arrange for staff to accompany #15 on his vacation.		No progress					
#15 will take a staff assisted vacation.		No progress QAOS #6-08					
#15 will crush cans each workday for 15 minutes.		yes data sheet present					
Three times each week, #15 will bundle newspapers for 15 minutes.		yes data sheet present					
#15 will carry two empty can racks after crushing cans daily.		no data from 8-30-07 until 4-15-08 QAOS #10-08					
# will stay busy at the day program.							
Hab Tech II will arrange for a Physical Therap evaluation and transportation.		done					
Hab Tech II will assist #15 with purchasing any needed PT equipment.		done					
#15 will follow the prescribed Physical Therapy treatment plan.		yes data sheet present					
Protocols:		Evidence staff clearly understood and were able to implement protocol?					

Comprehensive Evaluation  
6/26/2008

Provider: EMI                      Glendive    Brockway GH  
Eval Date: 5/7/2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

[illegible][illegible]



Comprehensive Evaluation  
6/26/2008

Provider: EMI      Glendive   Wyoming GH  
Eval Date: 5/7/2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer #17	Hours per ICP WAC - 18.80 GH - 41.81						
Actions per PSP		Evidence support provided consistently?					
At the WAC #17 will crush cans for a minimum of 15 minutes each work day.		yes data sheet present					
At the WAC #17 will bundle newspapers for a minimum of 15 minutes 3x week.		refused					
In the next year, #17 will earn a paycheck every 2 weeks.							
#17 will purchase personal items each month with assistance from GH Manager.		Only done in January and April QAOS #13-08					
#17 will have the opportunity to shop and spend his money.		Only done in January and April QAOS #13-08					
At WAC #17 will participate in prescroved PT each work day.		yes data sheet present					
At GH #17 will walk with staff assistance for a minimum of 5 minutes each day.		yes data sheet present					
#17 will be more mobile.							

Comprehensive Evaluation  
6/26/2008

Agency: EMI SL CS  
Evaluator: Kathleen Kaiser, QIS

Make note of site reviewed

**Residential Site Checklist: check if evidenced or mark data as appropriate**

**Appendix  
or QAOS**

Site Name	SL-#12	SL-#13	SL-#14			CS-#2	
<b>H e a l t h  S a f e t y</b>	Bathing procedures posted	NA	NA	yes		yes	
	Clean/Sanitary Environment	yes	yes	yes		yes	
	Egress	yes	yes	yes		yes	
	Hot Water Temps	118	120	120		117	
	Emergency Assistance	yes	yes	yes		yes	
	Fire Extinguishers/smoke Detectors	yes	yes	yes		no smoke detector	
	1st Aid/CPR Supplies Accessible/Available	yes	yes	yes		yes	
	PRN Medications	yes	yes	yes		yes	
	Medication Procedures	NA	NA	yes		yes	
	Medication Locked Storage	NA	NA	yes		yes	
	Medication Administration Records	NA	NA	yes		yes	
	Staff Ratios or ICP staffing	yes	yes	yes		yes	
	Awake Overnight Staff	NA	NA	NA		NA	
	Adequate Supplies	yes	yes	yes		yes	
	Storage of Supplies	yes	yes	yes		yes	
Free from aversive procedures?	yes	yes	yes		yes		
<b>D a i l y</b>	Weekly integrated activities	yes	yes	yes		yes	
	House or Site Rules	yes	yes	yes		yes	
	Opp for choice, self determination	yes	yes	yes		yes	
	Meal Prep, Mealtime	yes	yes	yes		yes	
	Engagement in Daily Life	yes	yes	yes		yes	
	Participation in Daily Living Skills	yes	yes	yes		yes	
	Daily Leisure Opportunities	yes	yes	yes		yes	
	Staff Trained in Individual Specifics	yes	yes	yes		yes	
<b>Comments:</b>							

#17-08

Comprehensive Evaluation  
6/26/2008

Agency: EMI      Glendive  
Evaluators: Cindy Frederickson

Make note of site reviewed

Residential Site Checklist: check if evidenced or mark data as appropriate										Appendix or QAOS
Site Name		Nolan	Brockway	Wyoming						
<b>H e a l t h  S a f e t y</b>	Bathing procedures posted	yes	yes	ye						
	Clean/Sanitary Environment	yes	yes	yes						#19-08
	Egress	yes	yes	yes						
	Hot Water Temps	110	105	100						
	Emergency Assistance	yes	yes	yes						
	Fire Extinguishers/smoke Detectors	8-May	8-May	8-May						
	1st Aid/CPR Supplies Accessible/Available	yes	yes	yes						
	PRN Medications	No	yes	no written PRN						#11-08
	Medication Procedures	yes	yes	yes						
	Medication Locked Storage	yes	yes	yes						
	Medication Administration Records	yes	yes	yes						
	Staff Ratios or ICP staffing	yes	yes	yes						
	Awake Overnight Staff	yes	yes	yes						
	Adequate Supplies	yes	yes	yes						
	Storage of Supplies	yes	yes	yes						
Free from aversive procedures?	yes	yes	yes							
<b>D a i l y</b>	Weekly integrated activities	see below	yes	see below						
	House or Site Rules	yes	yes	yes						
	Opp for choice, self determination	yes	yes	yes						
	Meal Prep, Mealtime	yes	yes	yes						
	Engagement in Daily Life	yes	yes	yes						
	Participation in Daily Living Skills	yes	yes	yes						
	Daily Leisure Opportunities	ok	excellent	ok						
	Staff Trained in Individual Specifics	yes	yes	yes						
<b>Comments:</b> Weekly integrated activities into the community needs improvement, but over all much better than last annual review. The Group Homes in Glendive are very neat and clean and well cared for. The Consumers rooms were nicely decorated and individualized with a great deal of care.										#19-08

Comprehensive Evaluation  
6/26/2008

Agency: EMI  
Evaluator: Cindy Fredickson

Make note of site reviewed

Residential Site Checklist: check if evidenced or mark data as appropriate								Appendix or QAOS	
Site Name		S. Earling	Stephanie	Gordon	BoxElder	Hafla			
<b>H</b> <b>e</b> <b>a</b> <b>l</b> <b>t</b> <b>h</b>  <b>S</b> <b>a</b> <b>f</b> <b>e</b> <b>t</b> <b>y</b>	Bathing procedures posted	yes	yes	yes	not posted	yes			#15-08
	Clean/Sanitary Environment	yes	yes	no	yes	yes			
	Egress	yes	yes	yes	yes	yes			
	Hot Water Temps	101	105	101	108	110			
	Emergency Assistance	yes	yes	yes	yes	yes			
	Fire Extinguishers/smoke Detectors	yes	yes	yes	no	yes			#14-08
	1st Aid/CPR Supplies Accessible/Available	yes	yes	yes	yes	yes			
	PRN Medications								
	Medication Procedures	yes	yes	yes	yes	yes			
	Medication Locked Storage	yes	yes	yes	yes	yes			
	Medication Administration Records	yes	yes	yes	yes	yes			
	Staff Ratios or ICP staffing	yes	yes	yes	yes	yes			
	Awake Overnight Staff	yes	yes	yes	yes	yes			
	Adequate Supplies	yes	yes	yes	yes	yes			
	Storage of Supplies	yes	yes	yes	yes	yes			
Free from aversive procedures?	yes	yes	yes	yes	yes				
<b>D</b> <b>a</b> <b>i</b> <b>l</b> <b>y</b>	Weekly integrated activities	yes	yes	yes	yes	yes			
	House or Site Rules	yes	yes	yes	yes	yes			
	Opp for choice, self determination	yes	yes	yes	yes	yes			
	Meal Prep, Mealtime	yes	yes	yes	yes	yes			
	Engagement in Daily Life	yes	yes	excellent	yes	yes			
	Participation in Daily Living Skills	yes	yes	yes	yes	yes			
	Daily Leisure Opportunities	yes	yes	no	yes	yes			#5-08
	Staff Trained in Individual Specifics	yes	yes	yes	yes	yes			
<b>Comments:</b> At Box Elder one out of three smoke detectors that were tested were working. At Gordon the bed rooms need to be cleaned on a regular basis. At Gordon the dinner was served family style and a consumer was in the shower and was served warm food an hour late with out any extra comments from the staff. At Gordon the dailly leisure opportunities was not consistently documented.								#14-08	
Commendations for creative holiday decoration competition it really enhanced the consumer's lives.								#5-08	

Comprehensive Evaluation  
6/26/2008

Agency: EMI  
Evaluators: Kathleen Kaiser, QIS

Residential Site Checklist: check if evidenced								Appendix or QAOS
Site Name	South E.	Hafla	Stephanie	Box Elder	Gordon			
<b>Transportation</b>	Driver Orientation Program	yes	yes	yes	yes	yes		
	Wheelchair tie downs	yes	yes	yes	NA	NA		
	Wheelchair Lift	yes	yes	yes	NA	NA		
	Driver's Licenses	yes	yes	yes	yes	yes		
	Emergency Supplies	yes	yes	yes	yes	yes		
	Fire Extinguisher	yes	yes	yes	yes	yes		
	Transportation Log	yes	yes	yes	yes	yes		
	Scheduled Maintenance Program	yes	yes	yes	yes	yes		
	Training--Staff Doing Maintenance Checks	yes	yes	yes	yes	yes		
	Procedures for Timely Repairs	yes	yes	yes	yes	yes		
	MDT inspection on file (MDT vehicles only)							
Comments: EMI has developed a new vehicle maintenance system to track repairs and maintenance to a fleet of 20 vehicles.								
Comments:								

Comprehensive Evaluation  
6/26/2008

Agency: EMI

Evaluators: Sandy Carpenter, QIS and Kathleen Kaiser, QIS

Staff Survey: check if 'met', 0 if 'unmet'									Appendix or QAOS
Staff Initials		DS	DT	KN	LR	LC	PW	RW	
<b>A</b>	Allegations are reported to? (APS)	no	yes	no	no	no	yes	no	#9-08
	Do you notify Supervisor first? (NO)	yes	no	no	no	no		no	
	Steps to take if abuse is discovered?			no		yes	no	yes	
	Comments :they would report abuse to their supervisor and not APS and there was no mention of writing an IR.								
<b>B</b>	Suspect theft of gloves, steps to take?	yes	yes	yes		yes		yes	
	IP/PSP requests Doctors appt				yes				
	No jacket, -25 consumer wants to leave	yes	yes	yes	yes	yes	yes	yes	
	Review Rts Restriction			NA		NA	yes		
	Comments:								
<b>B</b>	describe consumer behaviors	yes	yes	yes	yes	yes	yes	yes	
	staff response to behaviors by plan	yes	yes	yes	yes	yes			
	list proactive or environmental strategies		yes	yes	yes	yes	no	no	
	Comments:								
<b>C</b>	former employee wants info	yes	yes	yes	yes	yes		yes	
	what is consumer information?	yes	yes	yes		yes		yes	
	training to meet health and safety needs?	yes	yes	yes	yes	yes	yes		
	emergency evacuation procedures?			yes		yes	yes	yes	
	Comments:								

Comprehensive Evaluation  
6/26/2008

Agency: EMI Glendive  
Evaluators: Kathleen Kaiser, QIS

Staff Survey: check if 'met', 0 if 'unmet'									Appendix or QAOS
Staff Initials		RP	BB	PS					
<b>A PS</b>	Allegations are reported to? (APS)	no	no	yes					#9-08
	Do you notify Supervisor first? (NO)	yes	yes	yes					
	Steps to take if abuse is discovered?	yes	yes	yes					
	Comments : They would report abuse to their supervisor and not APS, and no mention on writing an IR.								
<b>S B P R</b>	Suspect theft of gloves, steps to take?	yes	yes	yes					
	IP/PSP requests Doctors appt								
	No jacket, -25 consumer wants to leave	yes	yes	yes					
	Review Rts Restriction	NA		NA					
Comments:									
<b>b B P</b>	describe consumer behaviors	yes	yes	yes					
	staff response to behaviors by plan	yes	yes	yes					
	list proactive or environmental strategies		yes	yes					
	Comments:								
<b>H O U S E H O L D I N G</b>	former employee wants info	yes	yes	yes					
	what is consumer information?	yes	yes	yes					
	training to meet health and safety needs?	no	yes	no					
	emergency evacuation procedures?		yes	yes					
Comments:									

Comprehensive Evaluation  
6/26/2008

Agency: EMI

Evaluators: Sandy Carpenter, QIS and Kathleen Kaiser, QIS

Staff Survey: check if 'met', 0 if 'unmet' with notation of incorrect answer									Appendix or QAOS
Staff Initials		DS	DT	KN	LR	LC	PW	RW	
<b>B E R C E N T E R</b>	describe procedure to assist with meds	yes	yes	yes		yes	yes	NA	
	if med is unavailable?			yes		yes	yes	NA	
	if gave wrong med?	yes	yes	yes		yes			
	if moving to a new place or gets new med?			yes					
	requirement to assist with meds?			yes	yes		yes		
	describe PRN or OTC is to be given			yes		yes			
	what constitutes a med error?			yes	yes				
Comments:									
<b>E R C</b>	steps to avoid power struggles			yes	yes	yes	yes	yes	
	how to respond to someone who is upset	yes	yes	yes		yes		yes	
	what is you start to lose control?	yes	yes	yes	yes	yes	yes	yes	
	Comments:								
<b>E R C</b>	when do you fill out an incident report?	yes		yes		yes	yes	yes	
	notifications for ER?				yes				
	consumer to consumer incidents		yes	yes		yes	yes	yes	
	who writes the IR?	yes	yes	yes	yes	yes		yes	
	Comments:								



Comprehensive Evaluation  
6/26/2008

Agency: EMI Glendive  
Evaluator: Kathleen Kaiser, QIS

Staff Survey: check if 'met', 0 if 'unmet' with notation of incorrect answer								Appendix or QAOS
Staff Initials		RP	BB	PS				
<b>B E D I C I N E S</b>	describe procedure to assist with meds	yes	yes	yes				
	if med is unavailable?	yes	yes	yes				
	if gave wrong med?	yes	yes	yes				
	if moving to a new place or gets new med?							
	requirement to assist with meds?							
	describe PRN or OTC is to be given	yes	yes	yes				
	what constitutes a med error?							
Comments:								
<b>E R C</b>	steps to avoid power struggles	yes	yes	yes				
	how to respond to someone who is upset	yes	yes	yes				
	what is you start to lose control?	yes	yes	yes				
	Comments:							
<b>H O U S E H O L D I N G</b>	when do you fill out an incident report?	yes	yes	yes				
	notifications for ER?	yes	no	no				
	consumer to consumer incidents	yes	yes	yes				
	who writes the IR?	yes	yes	yes				
	Comments:							

Comprehensive Evaluation  
6/26/2008

Agency: EMI

Evaluators: Sandy Carpenter QIS and Kathleen Kaiser

Staff Survey: check if 'met', 0 if 'unmet' with notation of incorrect answer									Appendix or QAOS
Staff Initials		DS	DT	KN	LR	LC	PW	RW	
<b>Bob</b>	consumer destroying things	yes		yes		yes	yes	yes	
	staff pinches consumer back	yes	yes	yes	yes	yes			
	how do you know a support plan is needed?		yes		yes		yes	yes	
	Comments:								
<b>IP/PSP</b>	what is IP/PSP based on?	no	yes	no	yes	yes		no	#9-08
	you have an idea for an objective.....	yes				yes	yes	yes	
	why do assessments?					yes	yes	yes	
	How do you find out what someone would like to do?		yes		yes				
	Comments: Several staff didn't know what a PSP was based on,								
Comments:									

Comprehensive Evaluation  
6/26/2008

Agency: EMI Glendive  
Evaluator: Kathleen Kaiser, QIS

Staff Survey: check if 'met', 0 if 'unmet' with notation of incorrect answer								Appendix or QAOS
Staff Initials		RP	BB	PS				
<b>Behavior</b>	consumer destroying things	yes	yes	yes				
	staff pinches consumer back	no	yes	yes				
	how do you know a support plan is needed?							
	Comments:							
<b>IP/PSP</b>	what is IP/PSP based on?	yes	yes	yes				
	you have an idea for an objective.....	yes	yes	yes				
	why do assessments?	yes	no	yes				
	How do you find out what someone would like to do?	yes		yes				
	Comments:							
Comments:								

Comprehensive Evaluation  
6/26/2008

Agency: EMI WAC GH SL  
Evaluator: Sandy Carpenter, QIS

Consumer Questionnaire (used by QIS). Check if evidenced. 0 if not asked. Bolded questions are mandatory								Appendix or QAOS
Consumer initials	community supports	#7	#8	#9	#10	#11	#12	
Consumer has/shows ID card? (if PSP documents this is not applicable, mark NA)								
<b>C O N S U M E R</b>	Do you have nice staff at home/work?						yes	
	Is anyone mean to you at home/work?						no	
	Do you like where you live/work?						yes	
	Are you ever afraid of anyone?						no	
	<b>Someone hits/hurts you, who can you tell?</b>						CM, trainer	
	<b>Does anyone talk to you about this?</b>						yes	
	Can you get help when you need it?						yes	
	from staff?						yes	
	from Case Manager?						yes	
	Can you get your own food/drink?						yes	
	Do people come into your house/room w/o knocking/permission?						yes	
	Do staff ever take things from you?						no	
	Can you get rides to places you need to go?						yes	
	Rides to the places you want to go?						yes	
	<b>Who is your Case Manager?</b>						ED	
<b>Does s/he talk to you about waiver services?</b>						yes		
<b>Does s/he help you get what you need?</b>						yes		
Comments:								

Comprehensive Evaluation  
6/26/2008

Agency: EMI WAC GH SL  
Evaluators: Sandy Carpenter, QIS and Kathleen Kaiser QIS

Consumer Questionnaire (used by QIS). Check if evidenced. 0 if not asked. Bolded questions are mandatory								Appendix or QAOS
Consumer initials			#13	#14				
Consumer has/shows ID card? (if PSP documents this is not applicable, mark NA)								
<b>C O N S U M E R</b>	Do you have nice staff at home/work?	yes	yes					
	Is anyone mean to you at home/work?	no	no					
	Do you like where you live/work?	yes	yes					
	Are you ever afraid of anyone?	no	no					
	<b>Someone hits/hurts you, who can you tell?</b>	trainer	trainer					
	<b>Does anyone talk to you about this?</b>	yes	yes					
	Can you get help when you need it?	yes	yes					
	from staff?	yes	yes					
	from Case Manager?	yes	yes					
	Can you get your own food/drink?	yes	yes					
	Do people come into your house/room w/o knocking/permission?	no	sometimes					
	Do staff ever take things from you?	no	no					
	Can you get rides to places you need to go?	yes	yes					
	Rides to the places you want to go?	yes	yes					
	<b>Who is your Case Manager?</b>	KP	ED					
<b>Does s/he talk to you about waiver services?</b>	yes	yes						
<b>Does s/he help you get what you need?</b>	yes	yes						
Comments:								

Comprehensive Evaluation  
6/26/2008

Agency: EMI CS  
Evaluators: Kathleen Kaiser, QIS

Consumer Questionnaire (used by QIS). Check if evidenced. 0 if not asked. Bolded questions are mandatory								Appendix or QAOS
Consumer initials	Community Supports	#2	#3	#4	#5	#6		
Consumer has/shows ID card? (if PSP documents this is not applicable, mark NA)								
<b>C O N S U M E R</b>	Do you have nice staff at home/work?	no	yes	yes	yes			
	Is anyone mean to you at home/work?	yes	no	no	no			
	Do you like where you live/work?	no	yes	yes	yes			
	Are you ever afraid of anyone?	no	no	no	no			
	Someone hits/hurts you, who can you tell?	CM	Mom	family	staff			
	Does anyone talk to you about this?	CM	CM	CM	CM			
	Can you get help when you need it?	yes	yes	yes	yes			
	from staff?	yes	yes	yes	yes			
	from Case Manager?	yes	yes	yes	yes			
	Can you get your own food/drink?	yes	yes	yes	yes			
	Do people come into your house/room w/o knocking/permission?	no	no	no	no			
	Do staff ever take things from you?	no	no	no	no			
	Can you get rides to places you need to go?	yes	yes	yes	yes			
	Rides to the places you want to go?	yes	yes	yes	yes			
	Who is your Case Manager?	LS	GG	GG	ED			
Does s/he talk to you about waiver services?	no	yes	yes	yes				
Does s/he help you get what you need?	yes	yes	yes	yes				
Comments:								

Comprehensive Evaluation  
6/26/2008

Agency: EMI WAC GH SL  
Evaluators: Sandy Carpenter, QIS and Kathleen Kaiser, QIS

Consumer Questionnaire (used by QIS). Check if evidenced. 0 Bolded questions are mandatory								Appendix or QAOS
Consumer initials	#7	#8	#9	#10	#11	#12		
<b>S u p p o r t</b>	Who helps this person and how?	staff	staff	staff	staff	staff		
	Are there some staff/peers they like better?	yes	yes	yes	yes	yes		
	Staff/peers they don't like? Why?	peer	no	no	no	no		
	Current needs not being met?	no	no	no	no	no		
	Health and Safety related?	no	no	no	no	no		
	Who do you talk to about these concerns?	supervisor	supervisor	supervisor	supervisor	supervisor		
	Does the person have input to his/her life?	yes	yes	yes	yes	yes		
	If you have concerns, who do you talk to?	supervisor	supervisor	supervisor	supervisor	supervisor		
	are they resolved?	yes	some	yes	yes	sometimes		
	What are this persons wishes/dreams?	family	family	health	health	family		
	is the plan moving that direction?	yes	yes	yes	yes	yes		
	what would make things better?	\$	family	food	1 on 1	DVD's		
	does this person ever seem afraid?	no	no	no	no	no		
	are you afraid for them?	no	no	no	no	no		
	Does this person know how or where to report abuse?	no	yes	yes	yes	yes		
	who provided that training?	supervisor	supervisor	supervisor	supervisor	supervisor		
	Who will the individual call or report to?	supervisor	supervisor	supervisor	supervisor	supervisor		
	who provided that info?	supervisor	supervisor	supervisor	supervisor	supervisor		
	Does the person have transportation to all services and places s/he would like to go?	yes	yes	yes	yes	yes		
	who is the person's case manager?	ED	ED	no	no	KM		
Does CM help the person access services?	yes	yes	yes	no	yes			
Does the CM explain waiver services?	yes	yes	yes	no	yes			
Does the person understand this info?	no	yes	yes	no	yes			
Comments:								

Comprehensive Evaluation  
6/26/2008

Agency: EMI      Glendive  
Evaluators: Kathleen Kaiser, QIS

Consumer Questionnaire (used by QIS). Check if evidenced. 0 Bolded questions are mandatory								Appendix or QAOS
Consumer initials		#15	#16	#17				
<b>S u p p o r t</b>	Who helps this person and how?	staff	staff	EMI staff				
	Are there some staff/peers they like better?	yes	yes	yes				
	Staff/peers they don't like? Why?	no	no	no				
	Current needs not being met?	no	no	no				
	Health and Safety related?	no	no	no				
	Who do you talk to about these concerns?	staff	staff	staff				
	Does the person have input to his/her life?	yes	yes	yes				
	If you have concerns, who do you talk to?	staff	gardian	staff				
	are they resolved?	some	yes	yes				
	What are this persons wishes/dreams?	family	family	health				
	is the plan moving that direction?	yes	yes	yes				
	what would make things better?	more	family	more to do at work shop				
	does this person ever seem afraid?	walkin	no	no				
	are you afraid for them?	no	no	no				
	Does this person know how or where to report abuse?	no	no	no				
	who provided that training?	CM	CM	CM				
	Who will the individual call or report to?	Pam	Pam	Pam				
	who provided that info?	CM	CM	CM				
	Does the person have transportation to all services and places s/he would like to go?	yes	yes	yes				
	who is the person's case manager?	GG	GG	GG				
Does CM help the person access services?	yes	yes	yes					
Does the CM explain waiver services?	yes	yes	yes					
Does the person understand this info?	no	no	no					
Comments:								



Comprehensive Evaluation  
6/26/2008

Agency: EMI CS  
Evaluators: Sandy Carpenter, QIS

Consumer Questionnaire (used by QIS). Check if evidenced. 0 Bolded questions are mandatory								Appendix or QAOS
Consumer initials		#2	#3	#4	#5	#6		
<b>S u p p o r t</b>	Who helps this person and how?					staff		
	Are there some staff/peers they like better?					yes		
	Staff/peers they don't like? Why?					no		
	Current needs not being met?					yes		
	Health and Safety related?					yes		
	Who do you talk to about these concerns?					Mom		
	Does the person have input to his/her life?					yes		
	If you have concerns, who do you talk to?					Mom		
	are they resolved?							
	What are this persons wishes/dreams?					future		
	is the plan moving that direction?							
	what would make things better?					slot		
	does this person ever seem afraid?					no		
	are you afraid for them?					no		
	Does this person know how or where to report abuse?					no		
	who provided that training?					CM		
	Who will the individual call or report to?					Mom		
	who provided that info?							
	Does the person have transportation to all services and places s/he would like to go?					yes		
	who is the person's case manager?					work		
Does CM help the person access services?					ED			
Does the CM explain waiver services?					yes			
Does the person understand this info?					yes			
Comments:								